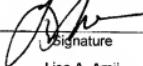


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<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2009 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</b>		Docket Number (Optional) <b>559022001200</b>	
Application Number <b>10/532,391</b>	Filed <b>October 28, 2003 (Int'l)</b>		
For <b>SYSTEM FOR, AND METHOD OF, HEATING A BIOLOGICAL SITE IN A PATIENT'S BODY</b>			
Art Unit <b>3739</b>	Examiner <b>K. Helling</b>		
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.			
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	<b>Fee \$130</b>	<b>Small Entity Fee \$65</b>	\$ <b>130.00</b>
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	<b>\$490</b>	<b>\$245</b>	\$ _____
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	<b>\$1110</b>	<b>\$555</b>	\$ _____
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	<b>\$1730</b>	<b>\$865</b>	\$ _____
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	<b>\$2350</b>	<b>\$1175</b>	\$ _____
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. <input type="checkbox"/> A check in the amount of the fee is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>03-1952</u> .			
<b>WARNING:</b> Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.			
I am the <input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). <input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>48,199</u> <input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____			
 <u>Lisa A. Amii</u> Typed or printed name		<u>October 23, 2009</u> Date <u>(650) 813-5674</u> Telephone Number	
<small>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</small>			
<input checked="" type="checkbox"/>	Total of <u>1</u> forms are submitted.		